PART B - FEE(S) TRANSMITTAL

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FORT COLLINS	S, CO 80527-2400	[(Depositar's name)				
			(Signature)				
			Ĺ		·	 	(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/706,046	0/706,046 11/13/2003		Olivier Mache		500203884-2		7134
TITLE OF INVENTION:	SUPPORT						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TO	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	12/11/2006
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS	7			
CHANG, YEAN HSI		2835	361-681000	_			
I. Change of corresponde CFR 1.363).	nce address or indicatio	2. For printing on the patent front page, list (1) the names of up to 3 registered pagent attorneys 1 FOLEY & LARDNER LLP					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a 1870504 registered attorney or agent) and the hames of the later attorney or agent attorneys or agents of no name is a 1489 89 00 00 00 00 00 00 00 00 00 00 00 00 00				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
HEWLETT-PACKARD DEVELOPMENT COMPANY, L.P. HOUSTON, TEXAS							
Please check the appropriate assignce category or categories (will not be printed on the patent):							
ta. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee Dublication Fee (N	o small entity discount p		☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.				
Advance Order - A				rector is hereby authorized to charge the required fee(s), any deficiency, or credit any rement, to Deposit Account Number 08-2025 (enclose an extra copy of this form).			
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Typed or printed name WILLIAM T. ELLIS Registration No. 26,874							

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